

AFFIDAVIT OF CUSTODIAN OF MEDICAL RECORDSSTATE OF OhioCOUNTY OF Summit

I, Zynora A. Daniels, am the duly authorized custodian of the medical records for **American Medical Response**, and as such I have (i) first-hand knowledge about the making, maintenance, and storage of the records; (ii) that the records are authentic as required by law; and (iii) that the attached records were (a) made at or near the time of the occurrence of the matters set forth by, or from information transmitted by a person with knowledge of those matters; (b) kept in the course of the regularly conducted activity of this office; and (c) were made or maintained as a regular practice. The records attached hereto constitute a true and correct copy of the medical records pertaining to the care and treatment of **Allen Douglas Hale**.

And further affiant saith not.

Zynora A. Daniels  
Custodian of Records



TO AND SUBSCRIBED before me this 22 day of May, 2015  
Heather Thorla  
Resident Summit County  
Notary Public, State of Ohio  
My Commission Expires: 07/24/2017

Heather Thorla  
NOTARY PUBLIC

My Commission Expires:

7/24/17



# AMR SOUTH MISSISSIPPI Patient Care Report

Case #: 60848358

Unit ID: 64

Date: 4/1/2015

## Dispatch Information

60848358

Time Call Received: 20:10:39  
Time Dispatched: 20:10:46  
Time Enroute: 20:11:02  
Time at Scene: 20:16:45  
Time at Pt Side: 20:18:00  
Time Cancelled: 20:52:31

Time Transporting: 20:27:19  
Time Transport Arrived: 20:36:48  
Time Available: 20:52:31  
Final Response Mode: Lights and Siren  
Final Transport Mode: Lights and Siren

Responder On Scene: Law enforcement , , BILOXI FD ,  
ALS Assessment: AMR EMT-P

Disposition: Transported-To Hospital ER/ED  
From Location:

8220 W OAKLAWN RD, BILOXI, MS 39532  
Incident Location Type: Home/Residence

To Location:  
GARDEN PARK MED CENTER

Floor/Dept/Room: er  
15200 COMMUNITY RD, GULFPORT, MS 39503

Destination Type: Medical - Hospital  
Nature of Call: GSW OVERRIDE-BRAVO  
Caller Name: BILOXI POLICE DEPARTMENT

Late Reason:  
Dispatch 2:

## Patient Demographics

60848358

Name: hale, allen  
Address: [REDACTED]  
City, State, Zip: [REDACTED]  
Phone: [REDACTED] Cell: [REDACTED]  
SSN: [REDACTED]  
Pt. # 1 of 1

DOB: [REDACTED]  
Age: [REDACTED]  
Gender: Male  
Weight: 86 Kg  
Ethnicity: Caucasian

## Physical Findings

60848358

Head: Head: Atraumatic, symmetric  
Neck: Neck: Atraumatic, no JVD  
Chest: Chest:  
Left Mid-Clavicular:  
Left Mid-Clavicular:  
Left Mid-Clavicular Remarks: Tazer barbs to chest .  
Abdomen: Right Upper Quadrant (RUQ): No Bleeding - Uncontrolled  
Right Upper Quadrant (RUQ): No Pain/Tenderness - On Palpation  
Right Upper Quadrant (RUQ): No Penetrating  
Right Upper Quadrant (RUQ) Remarks: .45 caliber GSW  
Pelvis: Pelvis: Stable, no crepitus or deformity  
Back: Back: No crepitus, deformity, pain  
Extremities: Extremities: CMS intact, no crepitus, deformity, pain  
Gastrointestinal Exam - Bowel Sounds: active , Bowel Care: BM PRN ,  
Genital/Urinary Exam - Urinary: Voids PRN ,

## History Of Present Illness

60848358

Chief Complaint: Gunshot wound  
Physician:  
Mechanism of Injury: Not Known Shooting .  
Safety Equipment: